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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	249-0018US
	First Inventor	Leon James Scott, III
	Title	Box for Shipping and Displaying Product
	Express Mail Label	EV 405192691 US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> )
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages <b>14</b> ] (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>3</b> ]	c. <input type="checkbox"/> Statements verifying identity of above copies
5. Oath or Declaration [Total Pages <b>2</b> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	<b>ACCOMPANYING APPLICATION PARTS</b>
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ Prior application information: Examiner _____ Group / Art Unit: _____	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.	11. <input type="checkbox"/> English Translation Document (if applicable)
<b>19. CORRESPONDENCE ADDRESS</b>	12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
<input checked="" type="checkbox"/> Customer Number: <b>29855</b> or <input type="checkbox"/> Correspondence address below	13. <input type="checkbox"/> Preliminary Amendment
Name _____	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
Address _____	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
City _____ State _____ Zip Code _____	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
Country _____ Telephone _____ Fax _____	17. <input type="checkbox"/> Other:

<b>19. CORRESPONDENCE ADDRESS</b>
<input checked="" type="checkbox"/> Customer Number: <b>29855</b> or <input type="checkbox"/> Correspondence address below
Name _____
Address _____
City _____ State _____ Zip Code _____
Country _____ Telephone _____ Fax _____

Name (Print/Type) <b>John C. Cain</b>	Registration No. (Attorney/Agent) <b>38,837</b>
Signature <i>John C. Cain</i>	Date <b>11/11/03</b>

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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22141 U.S. PTO 10706164



11273 U.S. PTO  
111203

PTO/SB/17 (10-03)  
Approved for use through 07/31/2006. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$448.00

Complete if Known

Application Number

Filing Date

First Named Inventor

Leon James Scott, III

Examiner Name

Art Unit

Attorney Docket No.

249-0018US

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit  
Account  
Number

501922

Deposit  
Account  
Name

Wong Cabello Lutsch Rutherford

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1001	770	2001	385		Utility filing fee	385.00
	1002	340	2002	170		Design filing fee	
	1003	530	2003	265		Plant filing fee	
	1004	770	2004	385		Reissue filing fee	
	1005	160	2005	80		Provisional filing fee	
SUBTOTAL (1)							(\$)
							\$385.00

### 2. EXTRA CLAIM FEES FOR UTILITY AND

Total Claims	Extra Claims	Fee from below	Fee Paid
27	-20** = 7	9.00	63.00
Independent Claims	3 - 3** = 0	43.00	0.00
Multiple Dependent			

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description
	1202	18	2202	9		Claims in excess of 20
	1201	86	2201	43		Independent claims in excess of 3
	1203	290	2203	145		Multiple dependent claim, if not paid
	1204	86	2204	43		** Reissue independent claims over original patent
	1205	18	2205	9		** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) \$63.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
	1051	130	2051	65		Surcharge - late filing fee or oath	
	1052	50	2052	25		Surcharge - late provisional filing fee or cover sheet	
	1053	130	1053	130		Non - English specification	
	1812	2,520	1812	2,520		For filing a request for <i>ex parte</i> reexamination	
	1804	920*	1804	920*		Requesting publication of SIR prior to Examiner action	
	1805	1,840*	1805	1,840*		Requesting publication of SIR after Examiner action	
	1251	110	2251	55		Extension for reply within first month	
	1252	420	2252	210		Extension for reply within second month	
	1253	950	2253	475		Extension for reply within third month	
	1254	1,480	2254	740		Extension for reply within fourth month	
	1255	2,010	2255	1,005		Extension for reply within fifth month	
	1401	330	2401	165		Notice of Appeal	
	1402	330	2402	165		Filing a brief in support of an appeal	
	1403	290	2403	145		Request for oral hearing	
	1451	1,510	1451	1,510		Petition to institute a public use proceeding	
	1452	110	2452	55		Petition to revive - unavoidable	
	1453	1,330	2453	665		Petition to revive - unintentional	
	1501	1,330	2501	665		Utility issue fee (or reissue)	
	1502	480	2502	240		Design issue fee	
	1503	640	2503	320		Plant issue fee	
	1460	130	1460	130		Petitions to the Commissioner	
	1807	50	1807	50		Processing fee under 37 CFR § 1.17(q)	
	1806	180	1806	180		Submission of Information Disclosure Statement	
	8021	40	8021	40		Recording each patent assignment per property (times number of properties)	
	1809	770	2809	385		Filing a submission after final rejection (37 CFR § 1.129(a))	
	1810	770	2810	385		For each additional invention to be examined (37 CFR § 1.129(b))	
	1801	770	2801	385		Request for Continued Examination (RCE)	
	1802	900	1802	900		Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) \$448.00

## SUBMITTED BY

Name (Print/Type) John C. Cain  
Signature *John C. Cain*

Registration No.  
(Attorney/Agent)

38,837

## Complete (if applicable)

Telephone

(832) 446-2403

Date

11/11/03

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